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CONFIRMATION NO. 6547

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|--|---|-------------------------------|---|--|-----------------------------------|
| <b>SERIAL NUMBER</b><br>10/732,740   | <b>FILING OR 371(c) DATE</b><br>12/10/2003<br><b>RULE</b>   | <b>CLASS</b><br>359           | <b>GROUP ART UNIT</b><br>2873   | <b>ATTORNEY DOCKET NO.</b><br>COVI:004 |                                   |
| <b>APPLICANTS</b><br>Thao D. Hovanky, Austin, TX;<br><b>** CONTINUING DATA **</b> <i>Yes LS</i><br>This appln claims benefit of 60/437,710 01/02/2003<br><b>** FOREIGN APPLICATIONS **</b> <i>No</i>   |   |                               |   |  |                                   |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b><br>** 03/16/2004  |   |                               |   |  |                                   |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met<br>Verified and Acknowledged <i>LS</i><br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>TX | <b>SHEETS DRAWING</b><br>9  | <b>TOTAL CLAIMS</b><br>68 96           | <b>INDEPENDENT CLAIMS</b><br>8 28 |
| <b>ADDRESS</b><br>O'KEEFE, EGAN & PETERMAN, L.L.P.<br>Building C, Suite 200<br>1101 Capital of Texas Highway South<br>Austin, TX78746  |   |                               |   |  |                                   |
| <b>TITLE</b><br>Systems and methods for actuating lens assemblies  |   |                               |   |  |                                   |
| <b>FILING FEE RECEIVED</b><br>4016   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                   |